

Secretary and Secretary of Agriculture and to Members of Congress for five farm bills and five child nutrition and WIC reauthorizations.

Over the course of his career, Mr. Ippolito served under six Presidents and eight Secretaries of Agriculture, five Chairmen of the U.S. House of Representatives Committee on Agriculture, and six chairmen of the U.S. Senate Committee on Agriculture, Nutrition, and Forestry.

In the Senate Agriculture Committee, in exercising our jurisdiction over FNS we not only work in a bipartisan fashion, we also work closely with the administration. When writing a farm bill or child nutrition and WIC reauthorization, we often call upon FNS staff, including Mr. Ippolito, for expertise. He put in many Saturday afternoons and late nights past 2:00 a.m. during legislative discussions and negotiations because of his dedication to providing Representatives, Senators, and our staff access to the information we need to serve the American people.

I commend Mr. Frank Ippolito for his many years of dedicated service to the U.S. Government and for the outstanding work he has done throughout his distinguished career. I congratulate him on the occasion of his retirement and extend my best wishes to him and his wife, Donna, in the years ahead.

Mr. HARKIN. Mr. President, I too wish to pay tribute to the accomplishments of Mr. Frank Ippolito and thank him for his many years of dedicated service to the American people and especially to the U.S. Department of Agriculture, Food and Nutrition Service, FNS. Mr. Ippolito has done an outstanding job as the career civil servant responsible for communications between FNS and Congress. During his long tenure, this critical agency, which benefits millions of Americans, has been greatly improved.

Mr. Ippolito has crossed many a path with countless elected officials and staff over the years, and without regard to party affiliation, he has treated each and every one of us with dignity, respect, and a helpful attitude that allows the work of Government to be performed efficiently and effectively. And in addition to his professionalism and competence, he has always carried out his work with a generous spirit and a cheerful personality.

In sum, Mr. Ippolito exemplifies the very model of a public servant. Frank Ippolito reminds us that, at its best, working for the Federal Government is ultimately about working for the people of the United States. At the end of a career, all of us who have worked in the Government or elected office should ask ourselves if, as a result of our careers, the people throughout America are better off as the result of our efforts. I am confident that Frank can enter retirement after three decades secure in his knowledge that the answer to that question is an emphatic yes.

I thank Mr. Frank Ippolito for his years of extraordinary service and wish

him and his wife Donna all the best on this occasion for his retirement.

MISSED OPPORTUNITIES IN HEALTH CARE

Mr. BAUCUS. Mr. President, this Congress has made little progress on health care.

We know the problems. Health costs are rising. The number of uninsured is growing. American companies, burdened by growing health-care obligations, are struggling to compete. And what has Congress done about it? Not much.

The trends are worsening. Last month, we learned that nearly 47 million Americans lack health insurance. That is up from a bit over 40 million in 2001. Last week we learned that health insurance premiums rose 7.7 percent last year. That is twice the rate of inflation. And nearly every day, I hear from an employer concerned about the rising cost of health care.

Unfortunately, this Congress has not made progress on these top-tier health issues. Congress has not made progress even where wide agreement exists.

There is wide agreement on health information technology, or health IT. Most experts agree that smarter use of health IT would cut costs. It would increase efficiency. It would reduce medical errors. And it would save lives.

Furthermore, health IT would help us to move to system of paying health care providers for the quality of care that they provide. That is an important priority of mine.

Last November, the Senate passed a health IT bill unanimously. That was nearly 11 months ago. Yet an agreement has still not been reached with the House on a compromise health IT bill.

This bill started with broad support across the Senate. But deliberations on this bill have now turned partisan. Recently, the majority has excluded Democrats from the conference committee deliberations.

There is also wide agreement on Medicare physician reimbursements. An overwhelming majority of Senators have urged action to prevent a pending 5.1 percent cut in the Medicare physician fee schedule for 2007. And there is broad agreement on the need to start rewarding quality in Medicare. But despite agreement on both issues, Congress has yet to act.

There is also wide agreement on helping seniors confused by the new Medicare drug benefit. The new Medicare drug program imposes a penalty on those who sign up after the enrollment deadline. But the way that the Government implemented the new Medicare drug program confused seniors.

In response, Chairman GRASSLEY and I joined a wide group of Senators to introduce legislation to waive the penalty for this year. But despite broad support for this measure, it remains unaddressed.

There is also wide agreement that we need to sustain important health safe-

ty net programs. In 3 months, funding for transitional medical assistance—TMA—will expire. TMA provides temporary health coverage to low-income working parents moving from welfare to work. Without a TMA extension, nearly 800,000 working parents will lose the temporary health coverage that they need to leave welfare and lead independent lives.

There is also wide agreement that we need to enact technical corrections to last year's Deficit Reduction Act. While I did not vote for that bill, it is important that Congress clarify any misunderstandings over its intent. I know that Chairman GRASSLEY shares my interest in getting this done as soon as possible.

There is also wide agreement to support the Children's Health Insurance Program, or CHIP. CHIP has helped cut the number of uninsured kids from 10.7 million in 1997 to 8.3 million in 2005. But despite this success, 17 States face federal funding shortfalls in their CHIP programs. These shortfalls potentially jeopardize coverage for hundreds of thousands of kids. We cannot afford to lose ground in our fight to provide more health coverage for children.

There is also wide agreement that we need to improve health care in Indian Country. In June, the Finance Committee reported legislation to improve access to Medicare, Medicaid, and CHIP in Indian Country. That bill is now part of the Indian Health Care Improvement Act. That bill is being held hostage by a handful of opponents on the other side.

There is no shortage of important health issues. Many health issues spark intense partisan disagreement. But that is generally not true about the ones that I just described.

That is why it is so disappointing that these issues—from Medicare physician payments to transitional Medicaid—remain unaddressed.

If we are ever going to make progress on the most difficult problems facing our health system—rising costs, the uninsured, threats to American competitiveness—we will have to work together and pass legislation. That we cannot even work together on issues with wide agreement is deeply troubling.

NATIONAL EMPLOY OLDER WORKERS WEEK

Mr. SMITH. Mr. President, I rise today in recognition of National Employ Older Workers Week, celebrated September 24-30, 2006. All too often we concentrate only on the social and economic challenges that the rapidly increasing numbers of older Americans present this Nation. This week's designation provides the opportunity to highlight the vital role that older workers can and do play in fostering a competitive economy through their workplace contributions.

As the baby boomer generation has begun to reach traditional retirement